

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

Louisianians for American Security Political Action Committee

ADDRESS (number and street) ▼

P.O. Box 6058

☐ Check if different than previously reported. (ACC)

Monroe

LA

71211-6058

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00144170

3. IS THIS  
REPORT☒NEW  
(N)

OR

☐AMENDED  
(A)

## 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☒ April 15  
Quarterly Report (Q1)☐ July 15  
Quarterly Report (Q2)☐ October 15  
Quarterly Report (Q3)☐ January 31  
Year-End Report (YE)☐ July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)☐ Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)  
(Non-Election  
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)  
(Non-Election  
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the  
State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the  
State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y Y

01

01

2016

03

31

2016

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Hans Sternberg

Signature of Treasurer

Hans Sternberg

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y Y

04

06

2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office  
Use  
Only**FEC FORM 3X**  
Rev. 12/2004

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Louisianians for American Security Political Action Committee

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y  
01 / 01 / 2016 To: M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span> <span style="border: 1px solid black; padding: 2px;">2016</span>		<span style="border: 1px solid black; padding: 2px;">201762.15</span>
(b) Cash on Hand at Beginning of Reporting Period.....	<span style="border: 1px solid black; padding: 2px;">201762.15</span>	
(c) Total Receipts (from Line 19) .....	<span style="border: 1px solid black; padding: 2px;">27427.31</span>	<span style="border: 1px solid black; padding: 2px;">27427.31</span>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<span style="border: 1px solid black; padding: 2px;">229189.46</span>	<span style="border: 1px solid black; padding: 2px;">229189.46</span>
7. Total Disbursements (from Line 31) .....	<span style="border: 1px solid black; padding: 2px;">5530.77</span>	<span style="border: 1px solid black; padding: 2px;">5530.77</span>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	<span style="border: 1px solid black; padding: 2px;">223658.69</span>	<span style="border: 1px solid black; padding: 2px;">223658.69</span>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<span style="border: 1px solid black; padding: 2px;">0.00</span>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<span style="border: 1px solid black; padding: 2px;">0.00</span>	

☒ This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE** of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

Louisianians for American Security Political Action Committee

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	1		2	0	1	6

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	1	6

**I. Receipts**
**COLUMN A**  
Total This Period

**COLUMN B**  
Calendar Year-to-Date

## 11. Contributions (other than loans) From:

## (a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

25400.00

25400.00

(ii) Unitemized .....

1680.00

1680.00

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ►

27080.00

27080.00

(b) Political Party Committees .....

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

0.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) ..... ►

27080.00

27080.00

## 12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

## 13. All Loans Received .....

0.00

0.00

## 14. Loan Repayments Received.....

0.00

0.00

## 15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

## 16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

## 17. Other Federal Receipts

(Dividends, Interest, etc.).....

347.31

347.31

## 18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3).....

0.00

0.00

(b) Levin Funds (from Schedule H5) .....

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

## 19. Total Receipts (add Lines 11(d),

12, 13, 14, 15, 16, 17, and 18(c)) ..... ►

27427.31

27427.31

## 20. Total Federal Receipts

(subtract Line 18(c) from Line 19) ..... ►

27427.31

27427.31

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	382.77	382.77
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	382.77	382.77
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	4700.00	4700.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements .....	448.00	448.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	5530.77	5530.77
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	5530.77	5530.77

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	27080.00	27080.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	27080.00	27080.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ..... ►	382.77	382.77
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ..... ►	382.77	382.77

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 19

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Louisianians for American Security Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Harold Asher**

Mailing Address 400 Poydras St.  
Suite 2640

City State Zip Code  
New Orleans LA 70130-3248

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Self

CPA

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 22 / 2016

Transaction ID : SA11AI.4155

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Morris Bart**

Mailing Address 909 Poydras St.  
Suite 2000

City State Zip Code  
New Orleans LA 70112

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Self

Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 01 / 2016

Transaction ID : SA11AI.4174

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**c. Allan H. Bissinger**

Mailing Address 4156 Vendome PI

City State Zip Code  
New Orleans LA 70125

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Electrical Sales

Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 22 / 2016

Transaction ID : SA11AI.4157

Amount of Each Receipt this Period

500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

2000.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
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PAGE 7 OF 19

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Louisianians for American Security Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Richard Cahn**

Mailing Address PO Box 52005

City

New Orleans

State

LA

Zip Code

70152-2005

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Dixie Mill Supply Co.

Occupation

Executive

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

02 / 22 / 2016

Transaction ID : SA11AI.4160

Amount of Each Receipt this Period

3000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Alan Franco**

Mailing Address 524 Metairie Rd.

City

Metairie

State

LA

Zip Code

70005

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self

Occupation

Self

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

02 / 22 / 2016

Transaction ID : SA11AI.4162

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**c. Dr. Juan J. Gershanik**

Mailing Address 1303 Henry Clay Ave

City

New Orleans

State

LA

Zip Code

70118

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self

Occupation

Physician

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

02 / 05 / 2016

Transaction ID : SA11AI.4115

Amount of Each Receipt this Period

1200.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

9200.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 8 OF 19

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Louisianians for American Security Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Dr. Charles G. Glaser**

Mailing Address 8040 St. Charles Ave

City State Zip Code  
 New Orleans LA 70118

FEC ID number of contributing  
federal political committee.

C

Name of Employer

St. Charles Vision

Occupation

Optometrist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

02 / 22 / 2016

Transaction ID : SA11AI.4164

Amount of Each Receipt this Period

750.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Dov Glazer**

Mailing Address 3525 Prytania St.  
 Suite 312

City State Zip Code  
 New Orleans LA 70115

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self

Occupation

Dentist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

02 / 15 / 2016

Transaction ID : SA11AI.4139

Amount of Each Receipt this Period

1250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. William D. Hess**

Mailing Address 8 Garden Ln

City State Zip Code  
 New Orleans LA 70124

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NA

Occupation

Retired Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

02 / 22 / 2016

Transaction ID : SA11AI.4166

Amount of Each Receipt this Period

500.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

2500.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 9 OF 19

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**Louisianians for American Security Political Action Committee**

Full Name (Last, First, Middle Initial)

## **A. Marcus Hirsch**

Mailing Address #72 Jamestowne Court

City State Zip Code  
 Baton Rouge LA 70809

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Self

Real Estate Developer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 02 / 15 / 2016

**Transaction ID : SA11AI.4140**

Amount of Each Receipt this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. Allan Kanner**

Mailing Address 1550 Dufossat St.

City State Zip Code  
 New Orleans LA 70115

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Allan Kanner & Assoc., P.C.

Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 02 / 15 / 2016

**Transaction ID : SA11AI.4142**

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. Jr. Herman S. Kohlmeier**

Mailing Address 123 Walnut St.  
 #1102

City State Zip Code  
 New Orleans LA 70118

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Self

Commodities Broker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 02 / 05 / 2016

**Transaction ID : SA11AI.4119**

Amount of Each Receipt this Period

300.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

2550.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 10 OF 19

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Louisianians for American Security Political Action Committee

Full Name (Last, First, Middle Initial)

A. Alfred S. Lippman

Mailing Address PO Box 2526

City State Zip Code  
Morgan City LA 70381-2526

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Self

Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 01 / 2016

Transaction ID : SA11AI.4176

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Richard Lipsey

Mailing Address 1 Lakewood Point Dr.

City State Zip Code  
Baton Rouge LA 70810

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Lipsey's Inc.

Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 15 / 2016

Transaction ID : SA11AI.4149

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

c. Mr. Stephen Manshel

Mailing Address 7523 Garnet St.

City State Zip Code  
New Orleans LA 70124

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Self

Investments

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 05 / 2016

Transaction ID : SA11AI.4123

Amount of Each Receipt this Period

500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2000.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 11 OF 19

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

Louisianians for American Security Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Dr. Kenneth P Mayers**

Mailing Address 300 Edgehill Circle

City

Lafayette

State

LA

Zip Code

70508

FEC ID number of contributing  
federal political committee.

C

Name of Employer

University of Louisiana at Laf

Occupation

Professor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		01		2016

Transaction ID : SA11AI.4111

Amount of Each Receipt this Period

350.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Dr. Ike Muslow**

Mailing Address 4747 Dixie Garden Road

City

Shreveport

State

LA

Zip Code

71105

FEC ID number of contributing  
federal political committee.

C

Name of Employer

None

Occupation

Retired Physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		01		2016

Transaction ID : SA11AI.4109

Amount of Each Receipt this Period

400.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Dr. Sanford Paillet**

Mailing Address 625 St. Charles Ave

City

New Orleans

State

LA

Zip Code

70130

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self

Occupation

Retired Physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		05		2016

Transaction ID : SA11AI.4125

Amount of Each Receipt this Period

300.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1050.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 12 OF 19  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

Louisianians for American Security Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Mr. Russell S. Palmer**

Mailing Address 201 St. Charles Ave

City	State	Zip Code
New Orleans	LA	70170

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Corporate Realty

Occupation

Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	05	/	2016

Transaction ID : SA11AI.4127

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Paul Rosenblum**Mailing Address 2424 Edenborne Av  
Suite 260

City	State	Zip Code
Metairie	LA	70001

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self

Occupation

Investor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	09	/	2016

Transaction ID : SA11AI.4182

Amount of Each Receipt this Period

1600.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Mr. Alvin Rotenberg**

Mailing Address 2773 Bocage Court East

City	State	Zip Code
Baton Rouge	LA	70809

FEC ID number of contributing  
federal political committee.

C

Name of Employer

La. Chemical Equipment Co Ltd.

Occupation

Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	05	/	2016

Transaction ID : SA11AI.4129

Amount of Each Receipt this Period

500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶

2350.00

TOTAL This Period (last page this line number only)..... ▶

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 OF 19  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

Louisianians for American Security Political Action Committee

Full Name (Last, First, Middle Initial)

A. Jay M. Shames

Mailing Address 123 Walnut St.  
#705

City State Zip Code  
New Orleans LA 70118

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Self

Retired Physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 23 / 2016

Transaction ID : SA11AI.4172

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. William I. Sizeler

Mailing Address 6117 Annunciation St.

City State Zip Code  
New Orleans LA 70118

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Sizeler Thompson Brown Archtct

Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 05 / 2016

Transaction ID : SA11AI.4131

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Hans Sternberg

Mailing Address 2375 Kleinert Ave

City State Zip Code  
Baton Rouge LA 70806

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Starmount Life Insurance Co.

Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 05 / 2016

Transaction ID : SA11AI.4190

Amount of Each Receipt this Period

1250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

3250.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 OF 19  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**Louisianians for American Security Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Marc Winston**

Mailing Address 1700 Josephine St.  
#201

City State Zip Code  
New Orleans LA 70113

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Marco Outdoor Advertising

Occupation  
Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 15 / 2016

Transaction ID : SA11AI.4153

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City State Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

500.00

25400.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 OF 19

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

**Louisianians for American Security Political Action Committee**

Full Name (Last, First, Middle Initial)

## **A. First NBC Bank**

Mailing Address 210 Baronne St.

City State Zip Code  
 New Orleans LA 70112

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

227.24

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 02 29 2016

**Transaction ID : SA17.4224**

Amount of Each Receipt this Period

109.87

☐ Memo Item

Interest

Full Name (Last, First, Middle Initial)

## **B. First NBC Bank**

Mailing Address 210 Baronne St.

City State Zip Code  
 New Orleans LA 70112

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

347.31

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 03 31 2016

**Transaction ID : SA17.4225**

Amount of Each Receipt this Period

120.07

☐ Memo Item

Interest

Full Name (Last, First, Middle Initial)

## **C.**

Mailing Address

City State Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

229.94

229.94

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

Louisianians for American Security Political Action Committee

 Memo Item

 Memo Item

 Memo Item

382.77



**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 17 OF 19

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Louisianians for American Security Political Action Committee

Full Name (Last, First, Middle Initial)

**A. GENE GREEN CONGRESSIONAL CAMPAIGN**

Mailing Address PO BOX 16128

City	State	Zip Code
HOUSTON	TX	77222

Purpose of Disbursement

Candidate Name

RAYMOND E. 'GENE' GREEN

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: TX District: 29

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01		19		2016

Transaction ID : SB23.4196

Amount of Each Disbursement this Period

500.00
--------

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. SCALISE FOR CONGRESS**

Mailing Address PO BOX 23219

City	State	Zip Code
JEFFERSON	LA	70183

Purpose of Disbursement

Candidate Name

STEVE MR. SCALISE

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: LA District: 01

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01		19		2016

Transaction ID : SB23.4198

Amount of Each Disbursement this Period

2300.00
---------

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. SCALISE FOR CONGRESS**

Mailing Address PO BOX 23219

City	State	Zip Code
JEFFERSON	LA	70183

Purpose of Disbursement

Candidate Name

STEVE MR. SCALISE

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: LA District: 01

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01		19		2016

Transaction ID : SB23.4200

Amount of Each Disbursement this Period

400.00
--------

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

3200.00
---------

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	21b		22	<b>X</b>	23		24		25		26
	27		28a		28b		28c		29		30b

Louisianians for American Security Political Action Committee

## A. SCHNEIDER FOR CONGRESS

Date of Disbursement

Transaction ID : SB23.4237

Category/  
Type

Bradley Scott Schneider

Disbursement For: 2016

☒ Primary ☐ General

☐ Other (specify) ▼

Amount of Each Disbursement this Period

1500.00

 Memo Item

**B.**

Date of Disbursement

Mailing Address

City	State	Zip Code
------	-------	----------

### Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Date of Disbursement

Mailing Address

City	State	Zip Code
------	-------	----------

### Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Amount of Each Disbursement this Period

 Memo Item

**SUBTOTAL** of Disbursements This Page (optional).....



1500.00

**TOTAL** This Period (last page this line number only).....

4700.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 19 OF 19

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Louisianians for American Security Political Action Committee

Full Name (Last, First, Middle Initial)

**A. US Dept of Treasury - Internal Revenue Service**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		01		2016

Mailing Address Department of the Treasury  
Internal Revenue Service Center

City Ogden State UT Zip Code 84201

Purpose of Disbursement  
Federal Income Taxes

Candidate Name

Category/  
Type

Transaction ID : SB29.4211

Amount of Each Disbursement this Period

448.00
--------

☐ Memo ItemOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**B.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

--

☐ Memo ItemOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**C.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

--

☐ Memo ItemOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional).....▶

448.00
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TOTAL This Period (last page this line number only).....▶

448.00
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